

In Agricultural districts it is rare to find a mother of a family engaged in work. Ignorance, infant insurance, cold and crowded cottages may each have their share in the destruction of the Medical Officer of Health and one more to this list - namely the difficulty experienced by the poor in many country places of obtaining to the supply of fresh milk. Fresh milk is an indispensable article of an infant's diet, but, owing to the decrease in the number of cows and the unwillingness of large farmers to retail milk, it is often most difficult to obtain. The substitution of other forms of food, easier to be obtained, is a great disadvantage. To the Chairman Ladies and Gentlemen of the Aylsham Rural District Council

Ladies and Gentlemen,

In presenting my first Annual Report I feel considerable diffidence following as I do your late Medical Officer of Health, a member of my profession who is as distinguished for his literary attainments as for his professional skill and who, through his long term of office, was able to make himself thoroughly acquainted with the sanitary requirements of your District.

I find myself labouring under the difficulty of having to report on the sanitary conditions of a District which I have not yet had opportunity of thoroughly exploring, and I am also at a disadvantage in dealing with statistics by not having those of previous years for comparison.

Population. The census of 1881 showed a population of 18,057. By 1891 it had fallen to 17,452 giving an average annual decrease of 60. Since the main cause of the de-population of rural districts in Norfolk, - agricultural depression, - is as much in evidence as ever, it may be fairly assumed that the population of the District has continued to decrease by about the same number annually as in the ten years preceding the last census. From these premises I estimate the population at the middle of the year 1896 to be 17,150, and this number will be used in calculating rates of mortality etc.

Births

The total number of Births during the year was 480 (males 262, females 224). The Birth-rate stands at 28 per 1,000 population.

Deaths.

The Deaths registered numbered 290 giving a death-rate of 16.9. This is somewhat high for a rural district, but, on analysing the causes of death, it is satisfactory to find that few were the result of infectious disease.

Infant Mortality

The number of deaths under 1 year was 65, while there were 480 births. The Infant Mortality per 1,000 births stands therefore at 135.4. This means that more than 13% of children born, die before completing their first year.

The great waste of Infant life is annually deplored by Medical Officers of Health throughout the Country. In manufacturing districts it is attributed to the employment of female labour.

ANNUAL REPORT

of the Medical Officer of Health

to the

AYLSHAM DISTRICT COUNCIL

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In Agricultural districts it is rare to find a mother of a family engaged in work away from her home. Maternal ignorance, infant insurance, cold and crowded cottages may each have their share in the destruction of infant life; but I would add one more to this last - namely the difficulty experienced by the poor in many country places of obtaining a daily supply of fresh milk. Fresh milk is an indispensable article of an infant's diet, but, owing to the decrease in the number of small cow-keepers and the unwillingness of large farmers to retail milk, it is often most difficult to obtain. The substitution of other forms of food, easier to be had, is the cause of many of the diseases to which infants in country districts succumb.

Old Age Mortality.

The number of deaths at ages over 65 years registered during the year was 128 giving an old age mortality of 7.4 per 1000 pop.

Infectious Disease.

I desire to congratulate the District Council on having at length adopted the Infectious Diseases (Notification) Act 1889. The provisions of this most needful Act came into operation on March 31st 1896 and by the help afforded by them I am able to sketch the incidence of infectious disease throughout the District for the greater part of the past year.

Since the Act has been in force 95 Certificates have been received and of these 87 were notifications of Scarlet Fever. The remainder comprised 5 cases of typhoid fever two of diphtheria and one of erysipelas.

The deaths from Infectious disease (including those from the non-notifiable division whooping-cough) were 19 which gives a Zymotic death-rate of 1.1 per 1,000 population.

Typhoid Fever

Five cases of typhoid fever were notified and one death was registered as due to this disease. The first case was notified on April 13th but not until after the patient had been ill three weeks. Disinfectants had not been used, and the excreta had been thrown into a hole close to the cottage which hole also received the slop water. Under these circumstances it was not surprising that a second case occurred in the same cottage. In a case notified from Hevingham the disease was found to have been contracted in Hainford. The remaining cases were probably of local origin. All were visited by myself or the Inspector and defective sanitary arrangements ordered to be remedied. Disinfectants were also supplied and directions given for the burying of the excreta.

Scarlet Fever.

This disease was prevalent over a large part of the District, especially in the last four months of the year. From the accompanying Table, giving the distribution of Scarlet Fever as to locality and time of year, it will be seen that the parishes of Cawston Hevingham and Saxthorpe suffered most severely; and that, as is usual with this fever, the Autumn season appeared to favour its spread.

In Cawston the disease made its appearance late in September.

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The first cases were of an exceedingly mild type and it was not until it spread to some overcrowded and not very sanitary Cottages that the epidemic assumed a more malignant constitution and two deaths result.

The number of cottages infected was not great so it was found possible to avoid closing the school by carefully excluding those children living in the immediate neighbourhood of infected cottages.

From Hevingham fifteen cases were notified; but this is probably far from being the total number. The people of Hevingham are peculiar in their habits and mode of life. It is perhaps owing to this that on a visit to the parish I found the fever well established without having received a single notification. The people had not considered Scarlet Fever of sufficient importance to call in medical aid. It was necessary to close the School for a month and one death resulted from this outbreak.

Scarlet Fever Sheet

In consequence of the general ignorance found to exist among the poorer classes concerning the infectious nature and danger of Scarlet Fever a sheet of "Precautions to be taken by householders to prevent the spread of Scarlet Fever" has been drawn up and in future a copy will be left at every house from which a notification of the disease is received.

Diphtheria

Only two notifications were received and no deaths were registered as occurring from this disease. This is an extremely satisfactory record.

Whooping-Cough

This most fatal disease of childhood accounted for thirteen out of a total of nineteen deaths from infectious disease. In addition to this great loss of life education suffered by six schools being closed for an aggregate period of twenty eight weeks.

With reference to the closing of Schools for Whooping-Cough, the practice generally adopted by managers is to delay closing until the attendance falls so low as to make it unprofitable to keep the school open. This is short-sighted policy so far as the interests of the School are concerned and a cruel injustice to the children. It is true that the greater number of deaths occur among children below the school age but the first case in a family is generally in a child attending School.

General Sanitary Condition of the District.

My appointment being of recent date and your District being an extensive one I hardly feel qualified to form an opinion on its general Sanitary condition. My work has naturally presented me with its least satisfactory aspect and has led me, indeed, to some dark spots.

In the sparsely populated Villages - the true country - where agricultural labourers live in "single" and "double dwellers" provided with large gardens - the sanitary arrangements of the cottages are simple and present no great difficulties. Overcrowding is perhaps the evil and frequently met with. The wages of an

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agricultural are insufficient for him to rent at market value a cottage large enough to accommodate himself and a family of six or eight children with decency and comfort. Some few are fortunate in living on large estates where the owner expects no return from money sunk in building cottages, but the majority of Agricultural labourers with large families must of necessity live in a more or less overcrowded state. Though doubtless detrimental to morals, this overcrowding does not appear to effect the health of the children to the extent that might be expected; the large amount of fresh air enjoyed during the day counter balancing the bad effects of the foul air inhaled at night.

More serious sanitary difficulties, however, arise in the small towns and large villages such as Aylsham, Reepham, Foulcham, Coltishall and Cawston where cottages, owned for the most part by persons of small means, have been crowded together and are destitute of gardens.

The drainage in these places is of the most primitive description - brick-arch drains carrying both surface water and sewage and ventilating into the roads and streets through the untrapped gullies is the usual system.

Privy bins of so large a capacity as to need emptying only once a year abound. They are usually deep, uncemented, and contain liquid filth.

For dry refuse large uncovered middens are provided. These also are sunk below the surface level and are generally wet.

Cesspools, built of loose brick work for the express purpose of allowing the filth poured into them to percolate with the surrounding soil, are the usual adjunct to any dwellinghouse of greater pretensions than a cottage. Where the soil is not sufficiently porous for the absorption of the liquid portion of their contents an overflow into the town drain is arranged. What is considered to be a good(?) cesspool will not require attention for many years.

Water Supply.

From the above description of the method of disposing of liquid and solid filth some idea can be formed of the condition of the soil in these crowded localities.

In this soil are sunk the wells which supply drinking water. Often the well is within a few feet of a cesspool or privy bin. There must therefore be a large percentage of wells, which, if not already polluted, are in constant peril of becoming so. It would be useless for me at the present time of agricultural distress to advocate any large scheme to provide a wholesome and safe water supply for these localities but I would point out the obvious duty of guarding the existing wells as much as possible from danger of pollution.

This must be done by replacing one by one the old soakage cesspools, deep privy bins and defective drains by appliances constructed on modern principles. By this means the soil, protected

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from the constant infiltration of filth, would become in course of time purified and as a result a safe water supply would be secured together with the immense advantage of a wholesome surface soil teeming with a bacteria hostile to germs of a harmful nature.

As a first step towards this end I would suggest the desirability of adopting the pail system and public scavenging in the small towns and more densely populated villages in your district, as regards cost, the expense attending the emptying of a pail once or twice a week will compare very favourably with the expense of the annual emptying of a deep privy bin. In the case of a small town, where a number of pails could be emptied by contract at regular intervals, a saving of money would result from the system.

Urban Powers.

While making an attempt to improve the existing state of things it is equally important to provide against fresh evils arising from cottages being built in crowded localities without proper provision being made for their sanitation. I would therefore suggest application being made to the Local Government Board for Urban powers under which bye-laws could be framed regulating the erection of new buildings. By this means small capitalists would be prevented from building cottages in unsuitable positions and without regard to their sanitation.

Sanitary Work

Wells.

From the Inspector's Report I find that twelve wells were cleaned out or repaired during the year. An attempt has been made to obtain a pure water supply for cottages in Drathgate Aylsham by sinking an Artesian Well but without success.

Nine samples of water have been examined by me, six of which were found to be impure.

An analysis by Sutton (County Analyst) of a sample of water from a well in the centre of Reepham showed it to contain "abundance of both recent and past sewage infiltration and to be quite unfit for drinking purposes." This well was surrounded by deep privy bins and a brick-arch "town drain" was found to pass within a few feet of it. The sanitation of the surroundings of this well have been taken in hand and there is a prospect of a better water supply being obtained.

Privies.

Thirteen new privies were built under the advice of the Sanitary Committee. Fourteen were repaired. Three were removed and in nine, pails were substituted for deep bins.

Drains & Cesspools

Ten nuisances requiring structural alterations in drains and cesspools are noted by the Inspector as having been taken in hand during the year.

The above Summary of Sanitary Improvements does not by any means represent the total amount of work accomplished during the past year in the District. A better system of recording the results of the action taken by the Sanitary Committee is required in

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As a first step towards this end I would suggest the desirability of adopting the bail system and public scavenging in the small towns and more densely populated villages in your district. As regards cost, the expenses attending the emptying of a bail once or twice a week will compare very favourably with the expense of the annual emptying of a deep privy pit. In the case of a small town, where a number of bails could be emptied by contract at regular intervals, a saving of money would result from the system.

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order to enable me to place before you a full account of work done.

Aylsham Drainage

A considerable amount of time was expended by the Sanitary Committee in considering a scheme for the better drainage of Hungate Street and its tributaries Rookery and Unicorn Yards . A specification was prepared which showed that an expenditure of about £120 would be required to provide this section of the town with a proper drainage system. The matter was ultimately referred to the Aylsham Parish Council for their opinion.

The Parish Council by an unanimous vote decided against the scheme.

Slaughter Houses.

During the year I have inspected a number of Slaughter houses in the District and have found in connection with them nuisances of a serious character resulting from improper disposal of blood and offal. When my information is more complete I purpose presenting a report on the subject to the Sanitary Committee with a view to their considering the advisability of framing bye-laws for the regulation of Slaughter houses.

Possibly the Council may consider that my Report has been cast in too gloomy a mood, and that the sanitary condition of the District does not demand such sweeping reforms to bring it up to the level of surrounding Rural Districts.

Were your district a popular "Health Resort" strong would be the temptations to prove by statistics (proverbially amenable) that the maintenance of its sanitary perfection was all sufficient.

I hold however, that a Report only can be of real practical value which brings all that is defective in the Sanitation of a District into the strongest light possible, and suggests in some measure the remedy.

In conclusion I desire to acknowledge the cordial support I have received from the Sanitary Committee during the past year which gives me every confidence of their co-operation in the future.

I have the honour to remain,

Your obedient servant,

HERBERT H. BACK M.B.

Med: Officer of Health to the
Aylsham Rural District Council.

Reepham.

March 16th 1897

GENERAL STATISTICS

Area in Acres		68.123
Population 1881		18.057
" 1891		17.452
Annual rate of decrease		60
Population (estimated) middle of 1896		17.150
Density of Population	1 to 3.9 acres	
Births 1896		480
Deaths 1896		290
" " under 1 yr.		65
" " over 65 yrs.		128
" " from zymotic disease		19
Birth-rate	per 1,000 pop.	28
Death-rate	"	18.9
Zymotic death-rate	"	1.1
Death-rate from Phthisis	"	.81
Infant Mortality	per 1,000 Births	135.4

GENERAL STATISTICS

68.123	Area in Acres
18.087	Population 1881
17.452	" 1891
80	Annual rate of decrease
17.150	Population (estimated) middle of 1898
	Density of Population
	1 to 3.9 acres
480	Births 1898
290	Deaths 1898
82	" " Under 1 yr.
128	" " over 65 yrs.
19	" " from typhoid disease
28	Birth-rate per 1,000 pop.
18.9	Death-rate
1.1	typhoid death-rate
81	Death-rate from Phthisis
125.4	Infant Mortality per 1,000 Births

TABLE SHOWING THE INCIDENCE OF SCARLET FEVER AS TO LOCALITY AND TIME OF YEAR

	Alby	Aylsham	Calthorpe	Cawston	Corpesty Saxthorpe	Coltishall	Foulsham	Gaestwick	Hovingham	Marshall	Reepham	Thursing	Total
Jan.													1
Feb.		1											4
March					4								3
April					3								4
May					3	2							4
June					2	1				1			4
July						1	1			5	1		6
Aug.													1
Sept:	1			4					6	1			14
Oct:	2			24					2	1	2		31
Nov:	1		4					3	4				12
Dec:				1	5				1				5
TOTALS	4	1	4	29	14	4	2	3	15	6	2	1	67

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Jan.																								
Feb.																								
Mar.																								
Apr.																								
May																								
June																								
July																								
Aug.																								
Sept.																								
Oct.																								
Nov.																								
Dec.																								
Total																								

NOTE: SHOWING THE INCIDENCE OF DISEASES AS TO MONTH AND TIME OF YEAR